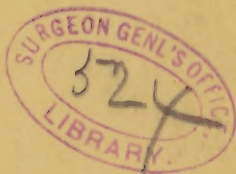


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A case of late syphilis

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**A CASE OF LATE SYPHILIS SHOWING UNUSUAL
LESIONS OF THE SKIN.**

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THE appearance of syphilis of the skin, especially when this occurs in the later stages of the disease, the so-called tertiary period, is likely to be manifested so often in very peculiar or even grotesque forms that it is just as likely to resemble some other disease of the skin as the one that has been the real cause of its appearance, and so much does this affection vary that I believe the record of such a case will be appreciated.

The patient, a female, forty years of age, presented herself for treatment at my dispensary service, at the Philadelphia Polyclinic, on the 27th day of March, 1894. She stated that the eruption had existed for the previous seven years, and that it gave her no trouble other than by its appearance. Her family history, as well as her own personal history, seemed to be very fair, and she, furthermore, did not remember ever having had the initial lesion of the disease. The woman was married at the age of twenty-three years, and is the mother of three living and healthy children, all of whom have remained in good health to the present day. Their ages are fourteen, twelve, and nine years respectively. She furthermore affirmed that she had never miscarried, and that



the previous births were all natural in delivery, and that she had had no trouble after the births.

The lesions, nine in number, were situated on the extensor surface of the right forearm, and scattered at irregular intervals between the elbow and three inches above the wrist. At the examination the arm was placed with the elbow in the patient's left hand, and the hand of the affected arm at the right shoulder. The first lesion to be described was three inches from the wrist, and was situated with the median line of the forearm running through its center, the lesion extending to within about three-quarters of an inch of either border of the forearm, measuring in itself from one end to the other about one-and-one-half inches, and was shaped like a sickle, the blade being toward the radial side of the forearm, and about one-and-one-half inches long on the curve of its upper border, and from one-eighth to one-quarter of an inch wide. The "handle" was on the ulnar side, and about three-quarters of an inch long, and from one-quarter to three-eighths of an inch in width, taking a downward course toward the inner border of the forearm. At the highest point of the curved portion a fissure ran directly across the lesion, from which a slight discharge of pus was noticeable; the borders of the fissure were irregular.

The second lesion was directly below the first, with about one inch of healthy skin intervening. It was irregularly crescent-shaped; measuring from the highest point to the lowest, it was about one inch in length, and one-eighth inch in width. Its lower half comprised the larger portion, being three-eighths of an inch in width and one-half inch in length across the forearm. From the ulnar side of this lower portion it took an upward course, curving around toward the radial side for a distance of three-quarters of an inch, and was from one-eighth to five-sixteenths of an inch in breadth.

The third lesion was circinate in character, and was

diseased throughout, being one-half inch in diameter. It was located on the radial side of the forearm, and about one-half an inch from the median line, and one inch from the outer border of the forearm.

The fourth lesion was parallel with the third, and was the largest and most irregularly shaped of all. It began at a point marking the radial side of the forearm and about five inches from the elbow, running diametrically toward the wrist for about three-eighths of an inch, and being from one-sixteenth to about one-eighth of an inch wide. At this point it widened out and ran horizontally across the forearm for about one-and-five-eighths of an inch, being three-eighths of an inch wide at the beginning of the latter portion (at which point was situated a large tubercle, fissured horizontally) and abruptly diminishing in breadth to from one-eighth to one-quarter inch for its entire remaining length. At the point ending the described portion, which was one-quarter inch from the border of the forearm, the lesion extended obliquely downward and inward toward the median line of the forearm for a length of one-and-one-eighth of an inch, then turned upward and pursued its course obliquely toward the median line for five-eighths of an inch to within one-half inch of its beginning point. The tissue was seemingly healthy and almost enclosed within the described lesion.

The fifth lesion, which was pear-shaped, and lying horizontally, with the apex toward the median line, was two inches below the third lesion and three-quarters of an inch from the median line. It consisted of two tubercles, one five-eighths of an inch in diameter, ovoid in shape, and one one-quarter of an inch in diameter and circinate; they were joined together, the smaller one being toward the median line.

The sixth lesion was one-quarter inch from the head of the ulna, and the same distance from the outer border of the forearm, its lower edge being parallel with the center of the head of the ulnar, and somewhat semi-

circular in shape. The point nearest the ulna consisted of one large tubercle, ovoid in form, and about three-eighths of an inch long. From the lower part of this tubercle it curved outward, upward, and inward for a distance of about one inch, forming the remainder of the semi-circle and being one-eighth of an inch in width and quite irregular in form.

The seventh, eighth, and ninth lesions were on the ulnar side of the forearm and slightly above the elbow, and one-quarter of an inch from the outer side. They were discrete, although the lesion nearest the inner side of the arm was apparently made up of two lesions that had coalesced. These three lesions were each in itself a tubercle varying from one-eighth to one-quarter of an inch in diameter.

